ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):	FOR COURT USE ONLY	
TELEDIJONE NO. EAV NO.		
TELEPHONE NO: FAX NO: ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA · COUNTY OF FRESNO		
☐ Fresno ☐ Clovis ☐ Coalinga ☐ Firebaugh ☐ Fowler		
1100 Van Ness Ave. 1011 Fifth St. 160 W. Elm St. 1325 O St. 127 E. Merced St.		
Fresno CA 93724 Clovis CA 93612 Coalinga CA 93210 Firebaugh CA 93622 Fowler CA 93625		
☐ Kerman ☐ Kingsburg ☐ Reedley ☐ Sanger ☐ Selma		
719 S. Madera Ave. 1600 California St. 815 G St. 619 N St. 2117 Selma St.		
Kerman CA 93630 Kingsburg CA 93631 Reedley CA 93654 Sanger CA 93657 Selma CA 93662		
PLAINTIFF/PETITIONER:		
DEFENDANT/RESPONDENT:		
NOTICE OF CHANCE OF ADDDESS AND THE EDITONE NUMBED	CASE NUMBER:	
NOTICE OF CHANGE OF ADDRESS AND TELEPHONE NUMBER		
Notice is hereby given that		
Attorney for Plaintiff/Petitioner Defendant/Respondent Other:		
has changed address to:		
New Address		
Address:		
City:		
State:		
Zip Code:		
Telephone Number: ( )		
ANY AND ALL NOTICES AND DOCUMENTS regarding this action should now be sent to the above address.		
Dated:		
(TYPE OR PRINT NAME)	(SIGNATURE)	

		<del>,</del>	
CAS	ETITLE	CASE NUMBER:	
PROOF OF SERVICE BY MAIL			
	NOTICE OF CHANGE OF ADDRESS AND TELEPHONE NUMBER		
1.	I am least 18 years old and <b>not a party to this case</b> . I am a resident or employed in the county where the mailir took place, and my residence or business address is ( <i>specify</i> ):		
2.	2. I served a copy of the <b>Notice of Change of Address and Telephone Number</b> by mailing it in a sealed envelope with postage fully prepaid, certified mail, return receipt requested, as follows:		
۷.			
	☐ I deposited the envelope with the United States Postal Service.		
	☐ I placed the envelope for collection and processing for mailing, following this business's ordinary practice, with		
	which I am readily familiar. On the same day correspondence is placed	for collection and mailing, it is	
	deposited with the United States Postal Service in the ordinary course of	business.	
3.	. Manner of service:  Date of mailing:		
	Place mailed from:		
	Addressed as follows:		
	Name:		
	Street:		
	City, State, Zip Code:		
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
Dated:			

(TYPE OR PRINT NAME)

(SIGNATURE)